FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)				
	,	,	Offic	e use only
NAME OF COMMITTEE (in a	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Friends of Olif	5 Oto			
Friends of Clif	r Stearns			
ADDRESS (number and s	PO BOX 308			
(Check if addre is changed)	ess			
	SILVER SPRINGS		LFL L	34489 -
		CITY▲	STATE	ZIP CODE ▲
COMMITTEE'S E-MAI				
campaign@cli	ifstearns.net			
COMMITTEE'S WEB PAGE ADDRESS (URL)				
cliffstearns.ne	et			1
COMMITTEE'S FAX N	UMBER			
2. DATE 0.5	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER C C00229377				
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have exami	ned this Statement and to the best of my kr	nowledge and belief it is true, correct ar	nd complete	_
	_			
Type or Print Name of	Treasurer Treasurer			
Signature of Treasurer	Electronically Filed by Treasure	er	Date 12 /	0 6 Y 2 0 0 5
NOTE: Submission of fal	se, erroneous, or incomplete information m	ray subject the person signing this Stat	ement to the penalties o	f 2 U.S.C. S437a.
	·	ATION SHOULD BE REPORTED	•	ÿ
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)